



**STATE OF NEW HAMPSHIRE**  
**2017 Statement of Income and Expenses**  
**for LOBBYISTS**  
**(RSA Chapter 15)**

PLEASE PRINT

RECEIVED

I. Name of Lobbyist(s) Benjamin Sahl

JUL 26 2017

II. Name of lobbyist's partnership, firm or corporation, if any:

NEW HAMPSHIRE  
DEPARTMENT OF STATE

Disability Rights Center - NH  
(Name of partnership, firm or corporation)

64 N. Main St, Ste 2 Concord NH 03301  
Business Address: (Street) (Town/City) (State) (Zip Code)

603 228-0432 603 225-2077 e-mail bens@drenh.org  
(Telephone) (Fax)

III. This statement covers: (Choose one – file separate reports for each client, OR you may file a separate report for reportable expense transactions which are not attributable to any one client).

☐ All reportable transactions occurring in the months prior to the reporting date relative to the following client:

(Full Name of Client as it appears on the Lobbyist Registration Form)

**OR**

☐ All reportable transactions by the lobbyist (including the lobbyist's family), or the lobbying firm listed below which are unrelated to any particular client.

IV. Date of Report April 26, 2017 ☐

July 26, 2017 ☒

Reports cover: activity from date of registration to 3/31/17

activity from 4/1/17 to 6/30/17

October 25, 2017 ☐

January 31, 2018 ☐

activity from 7/1/17 to 9/30/17

activity from 10/1/17 to 12/31/17

V. There have been no fees received and no reportable transactions made since the last report. ☒

*If this box is checked, complete just this form and submit it to the Secretary of State's Office, State House, Room 204, Concord, NH 03301.*

VI. Check if additional reports are attached:

☐ If you have received fees or made expenditures, you must file **Addendum A**– Fees and Expenses

☐ If you have paid an honorarium or reimbursed expenses, you must file **Addendum B**– Report of Honorariums or Expense Reimbursement

☐ If you, your firm, or your family has made political contributions, you must file **Addendum C**– Political Contributions

**Sworn Statement/Affirmation by Lobbyist**

I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief.

(Signature of lobbyist)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Print Name of lobbyist)